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**FAX TRANSMITTAL**

To: <u>Examiner C. Paden</u>	From: <u>Jerry McHowan</u>
<u>703-872-9310</u>	
Fax no.: _____	Date: <u>10-18-05</u>
cc: _____	No. of Pages: <u>5</u> (including cover sheet)

RE: F7469(V)

MESSAGE: Attached please find  
① Amendment  
② Transmittal letter

for:  
Applicant: De Boer et al.  
Serial No: 09/454,774  
Filed: December 3, 1999

IF PROBLEMS OCCUR WITH THIS TRANSMISSION PLEASE CONTACT Patent

AT EXT. 2528

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"Commissioner for Patents  
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Alexandria, VA 22313-1450"

on October 18, 2005



GERARD J. MCGOWAN, Jr.  
Reg. No. 29,412  
Attorney for Applicant(s)

October 18, 2005  
Date of Signature

PATENT

CASE #F7469(V)  
UNUS #99-0134-UNI

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OCT 18 2005

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: DeBoer et al.  
Serial No.: 09/454,774  
Filed: December 3, 1999  
For: Food Composition

Group: 1761  
Examiner: Carolyn Paden  
Englewood Cliffs, New Jersey 07632

AMENDMENT

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Further to the Advisory Action mailed September 1, 2005, please amend the application as follows.

**Amendments to the claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 3 of this paper.

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**CERTIFICATE OF FACSIMILE**

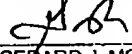
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P.O. Box 1450  
Alexandria, VA 22313-1450

on October 18, 2005

  
GERARD J. MCGOWAN *Jn*  
Reg. No. 29,412  
Attorney for Applicant(s)

October 18, 2005  
Date of Signature

In re application of: DeBoer et al.  
Serial No.: 09/454,774  
Filed: December 3, 1999  
For: Food Composition

Group: 1761  
Examiner: Carolyn Paden  
Englewood Cliffs, New Jersey 07632

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below.

**CLAIMS AS AMENDED**

	(2) * Claims Remaining After Amendment		(4)** Highest No. Previously Paid For	(5) Present Extra	(6) Rate	(7) Additional Fee
Total Claims		Minus			\$ 50.00	
Independent Claims		Minus			\$ 200.00	
Multiple Claims					\$ 360.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$	

\*If the entry in Column (2) is less than the entry in Column (4), write "0" in Column (5).

\*\*If the "Highest No. Previously Paid For" is less than "20," write "20" in this space.

[ ] Charge \$\_\_\_\_\_ to Deposit Acct. #12-1155. Triplicate copies of this letter are enclosed.

[X] The Commissioner is hereby authorized to charge any additional fees, which may be required to our deposit account No. 12-1155, including all required fees under

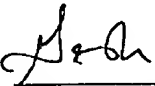
[X] 37 C.F.R. § 1.16;

[X] 37 C.F.R. § 1.17;

[X] 37 C.F.R. § 1.18.

Triplicate copies of this letter are enclosed.

GJM/pod  
(201) 894-2297

  
Gerard J. McGowan, Jr.  
Attorney of Record  
Reg. #29,412